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**FACSIMILE COVER SHEET**

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**DATE:** July 3, 2007

**TO:** Examiner Kevin R. Kruer  
 Group Art Unit 1773

**PHONE #:** 571-272-1510

**FAX #:** 571-273-8300

**Application No.:** 10/790,338  
**Applicant:** LUTHRA et al.  
**Due Date:** July 3, 2007

**OUR REF.:** 2177.16US02

**FROM:**  
**PHONE #:**

Attached please find the following for filing in the above-identified application.

1. Notice of Appeal.

Respectfully submitted,

  
 Curtis B. Herbert, Ph.D.  
 Registration No. 45,443

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. 571-273-8300 on the date shown below.

July 3, 2007  
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 Curtis B. Herbert, Ph.D.

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JUL 03 2007

## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of:

Attorney Docket No.: 2177.16US02

LUTHRA et al.

Confirmation No.: 9411

Application No.: 10/790,338

Examiner: Kevin R. Kruer

Filed: March 1, 2004

Group Art Unit: 1773

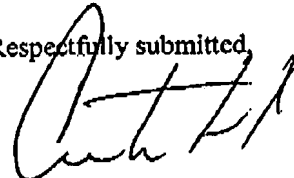
For: POLYMERIC NETWORK SYSTEM FOR MEDICAL DEVICES AND METHODS OF USE

NOTICE OF APPEALCommissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In accordance with 37 C.F.R. § 1.191, Applicants hereby appeals to the Board of Appeals from the Office Action mailed May 3, 2007, finally rejecting claims 54-104, 151-197, 199-206 and 209-215 in the above-identified patent application. The Commissioner is hereby authorized to charge Deposit Account No. 50-3863 in the amount of \$250.00 to cover the official fee for a small entity.

Respectfully submitted,

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July 3, 2007  
Date  
Curtis B. Herbert, Ph.D.